

RECEIVED FEC MAIL GENTER

2016 APR 25 AM 10: 43

April 12, 2016

FEDERAL ELECTION COMMISSION 999 E Street, NW Washington, DC 20463 Attn: Vickie Davis

Re: Willie Wilson 2016 Committee ID-C00577916

Dear Ms. Davis,

Please accept this letter as confirmation that I, Dr. Willie Wilson, forgive ALL loans made to the Willie Wilson 2016 Presidential campaign. You may disregard any loans that appear on the reports. I have also attached a copy of my final termination report.

Feel free to contact Ringold Financial at 312-566-9705 with any questions on the report.

Sincerely,

Dr. Willie Wilson

[★] Please also be advised that \$10,000.00 was reimbursed to me in April 2016 and that is the only payment toward the loans given. All other balances remain forgiven. See the attached list if items paid from the \$15,956.54 cash on hand at the end of March 2016.

2016 -04-25-03-00071240

FEC FORM 3P

> Office Use Only

REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE

2016 APR 25 AM 10: 43

FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT Office Use Only 1. NAME OF COMMITTEE (in full, type or print) 12FE4M5 Example: If typing, type over the lines. Willie Wilson 2016 ADDRESS (number and street)) 345 E. Wacker Unit 4601 Check if different than previously Chicago reported. (ACC CITY STATE ZIP CODE 2. FEC IDENTIFICATION NUMBER C00577916 3. THIS REPORT IS FOR Primary or General TYPE OF REPORT (Choose One) Check here if this is a Termination Report (TER) Quarterly Reports: Monthly Reports: April 15 (Q1) Aug 20 (M8) October 15 (Q3) May 20 (M5) Nov 20 (M11) January 31 Year-End Report (YE) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) Oct 20 (M10)) Twelfth day report preceding L Thirtieth day report following the General Election election in the State of × Is this Report an Amendment? 03 01 2016 2016 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Andre Fair Type or Print Name of Treasurer 20 V-1-V-1-V-1-V Andre Fair 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Write or Type Committee Name

Willie Wilson 2016

Report Covering the Period:

From:

03 ○	,	01	,	2016

To:

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2016	
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SUMMARY

6.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	8803.84
7.	TOTAL RECEIPTS THIS PERIOD	,
	(From Line 22, Column A, Page 3)	62188.70
8.	SUBTOTAL	
	(Lines 6 and 7)	70992.54
9.	TOTAL DISBURSEMENTS THIS PERIOD	
Э.		
	(From Line 30, Column A, Page 2)	55036.00
10.	CASH ON HAND AT CLOSE OF THE REPORTING PERIOD	
	(Subtract Line 9 from 8	15956.54
		j j j
11.	DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE	
	(Itemize All on Schedule C-P or Schedule D-P)	0.00
12.	DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE	
	(Itemize All on Schedule C-P or Schedule D-P)	1055100.00
13.	EXPENDITURES SUBJECT TO LIMITATION	1041183.71
	\cdot	L

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14.	NET CONTRIBUTIONS (Other than Loans)	 	٠
		35390.25	
15.	NET OPERATING EXPENDITURES	•	
		1041183.71	
		 ┸┸┸┸	

DETAILED SUMMARY PAGE PAGE 3 / 44 of Receipts FEC Form 3P (Rev. 03/2011) NAME OF COMMITEE (in Full) |Willie Wilson,2016 03 M 03 31 2016 01 2016 Report Covering the Period: From: To: **COLUMN B COLUMN A** I. RECEIPTS **Election Cycle-to-Date Total This Period** 16. FEDERAL FUNDS (Itemize on Schedule A-P)..... 0.00 0.00 17. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other Than Political Committees (i) itemized 1983.00 28685.00 (ii) unitemized 348.25 6705.25 (iii) Total contributions .. 2331.25 35390.25 Political Party Committees. 0.00 0.00 Other Political Committees 0.00 0.00 The Candidate..... 0.00 0.00 TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) 35390.25 2331.25 18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES 0.00 19. LOANS RECEIVED: (a) Loans Received From or Guaranteed by 50000.00 1055100.00 Other Loans.... (b) 0.00 0.00 1055100.00 50000.00 (c) TOTAL LOANS (Add 19(a) and 19(b) 20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.): Operating 9857.45 9931.40 Fundraising.. 0.00 0.00 Legal and Accounting 0.00 0.00 TOTAL OFFSETS TO EXPENDITURES 9857.45 (Add 20(a), 20(b) and 20(c)) 9931.40 21. OTHER RECEIPTS (Dividends, Interest, etc.)... 0.00 0.00 22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) ...

1100421.65

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011) of	Disbursements and Contributed Items	PAGE 4 / 44
NAME OF COMMITEE (in Full) Willie Wilson 2016		
	03 / 01 / 2016 To:	03 / 31 / 2016
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
23. OPERATING EXPENDITURES	55036.00	1051115.11
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
		0.00
25. FUNDRAISING DISBURSEMENTS 26. EXEMPT LEGAL AND	0.00	0.00
ACCOUNTING DISBURSEMENTS	0.00	0.00
27. LOAN REPAYMENTS MADE: (a) Repayments of Loans made or Guarant		
by Candidate	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	0.00	0,00
28. REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political	Control Control March Language (March Language Control	handle handle hand frame handle handle for the first handle handl
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	0.00
29 OTHER DISBURSEMENTS	0.00	33350.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	55036.00	1084465.11
III. CONTRIBUTED ITEMS (Stock, Art Objects, Etc.)	Eventual Assessed Assessed Assessed Assessed Principle Assessed As	The second behavior to be a second below the second behavior to be a second be
31. ITEMS ON HAND TO BE LIQUIDATED		
(Attach List)	0.00	

FEC FORM 3P, Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

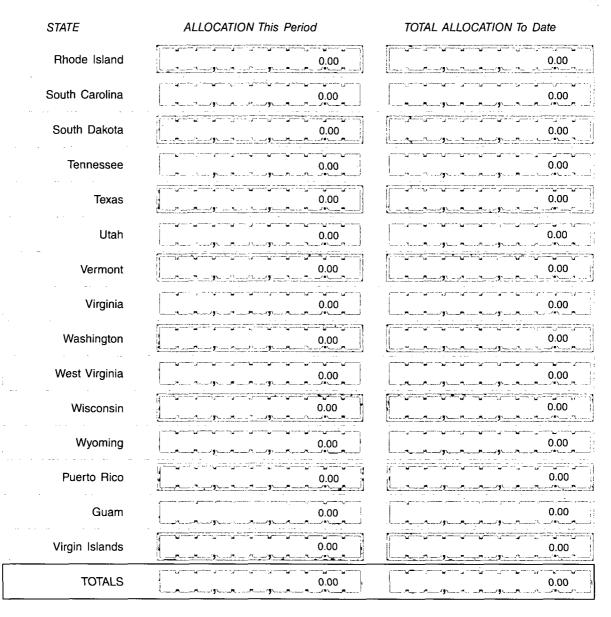
Illinois

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE

(Used Only by Primary Committees Receiving or Expecting To Receive Federal Funds)

	or Expecting To Rec	eive Federal Funds)	Office Use Only	
1. NAME OF COMMITTEE	(in full, type or print) 2	. FEC IDENTIFICATION N	UMBER C C00577916	
Willie Wilson 2016			·	
	<u> </u>			
ADDRESS (number and street)	345 E. Wacker Unit 4601	1111111		
				لبب
	Chicago		STATE ZIP CODE	E
3. NAME OF CANDIDATE				
	ALLO	CATION BY STATE		
STATE	ALLOCATION T	his Period	TOTAL ALLOCATION To Date	
Alabama	3	0.00	0.00	
Alaska	a j	0.00	0.00	• •
Arizona	a	0.00	0.00	
Arkansa	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.00	0.00	
California	a	0.00	0.00	
Colorado		0.00		•
Connecticu	it i j i	0.00	0.00	1
Delaware		0.00	ر من دران منه کو اور این	
District of Columbia	a a second secon	0.00		
Florida		0.00	0.00	
Georgia	a Carlo de April de Arra de Ar Arra de Arra d	0.00	0.00	•
Hawa		0.00		
ldaho		0.00	0.00	•

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Indiana	0.00	0.00
lowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00 د مان د اور د می ورد مان مان د د این این این این این د این دیگر این د	0.00 ولي من من دو المالية الم
Minnesota	0.00	0.00
Mississippi		0.00
Missouri	0.00 Supplies the section of the se	0.00
Montana	0.00	0.00
Nebraska Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey		
New Mexico	0.00	4 2 40 2 0 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0
New York	0.00 mg	A COMPANY OF THE PROPERTY OF T
North Carolina	0.00	The second secon
North Dakota	0.00	
Ohio		0.00
Oklahoma	0.00	
Oregon		
Pennsylvania	0.00	0.00



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SCHEDUL	E A-P
ITEMIZED	RECEIPTS

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2016
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25.00
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saction ID : AABC5B73588294359A of Receipt
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saction ID : A8E0583A136F048D593 of Receipt
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SCH	EDUL	E A-	P	
ITEM	IIZED	REC	EIP	ΓS

FOR LINE NUMBER: PAGE 9 / 44 Use separate schedule(s) (check only one) for each category of the 16 X 17a 17b 17c 17d 18 Detailed Summary Page 19a 19b 20a 20b 20c 21

NAME OF COMMITTEE (In Full) Willie Wilson 2016					
A. Full Name (Last, First, Middle Initial) Janette Wilson	Transaction ID : A84874B5F48E04E60B92 Date of Receipt				
Mailing Address 3810 Streamwood					
City Hazel Crest	State Zip Code IL 60429-2454	03 07 2016			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period			
Name of Employer Cook County Government	Occupation Admin Analyst	500.00			
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	Memo Item			
B. Full Name (Last, First, Middle Initial) Andre Harrison		Transaction ID : A296B45080B28468DB0A Date of Receipt			
Mailing Address 5839 Woodgate Dr	State Zip Code	03 7 2016			
Matteson	IL 60443-1140				
FEC ID number of contributing federal political committee.	[C]	Amount of Each Receipt this Period			
Name of Employer Information Requested	Occupation Information Requested	100.00			
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 300.00	Memo Item			
C. Full Name (Last, First, Middle Initial) Rev. Joseph L. Henry					
Mailing Address 2021 W. 171st Street	03 07 / 2016				
City Hazel Crest	State Zip Code IL 60489	hammaniani kanamana k			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period			
Name of Employer Information Requested	Occupation Information Requested	25.00			
Receipt For: 2016 ☐ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date	Memo Item			
Subtotal Of Receipts This Page (o	625.00				
Total This Period (last page this line					

SCHEDUL	E A-P
ITEMIZED	RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

16 X 17a 17b 17c 17d 19a 19b 20a 20b 20c 20c

Full Name (Last, First, Middle Initial) Diann Williams Baker		Transaction ID : A4495D6326B4E4B9AB9E
Mailing Address 1936 S. 12th Ave		Date of Receipt Model Date Dat
City Maywood	State Zip Code IL 60153-3120	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Omar Medical Supplies	Occupation Sales	608.00
Receipt For: 2016 ☐ Primary ☐ General Other (specify) ▼	Election Cycle-to-Date ▼ 978.00	Memo Item
Full Name (Last, First, Middle Initial) Michael Thompson		Transaction ID : A383E13F15E8C449EB10 Date of Receipt
Mailing Address 4 Bridget CT	State Zip Code	03 / DJD / YYYYY 2016
City Burr Ridge	IL 60527-7945	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer Information Requested	Occupation Information Requested	500.00
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 500.00	Memo Item
Full Name (Last, First, Middle Initial)	l	Date of Receipt
Mailing Address		MAM , LOMO , LANAMAILA
City	State Zip Code	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date	Memo Item
Subtotal Of Receipts This Page (opti	onal)	1108.00
Total This Period (last page this line i	number only)	

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)					Р	AGE	11 /	44		
Ò	16		17a		17b		17c		17d	18
X	19a		19b		20a		20b		20c	2

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Willie Wilson 2016						
A. Full Name (Last, First, Middle Initial) Dr. Willie Wilson						
	Mailing Address 345 E. Wacker Unit 4601					
City Chicago	State Zip Code IL 60601-5275	03 , 14 , 2016 Loan				
FEC ID number of contributing federal political committee.	C P60007515	Amount of Each Receipt this Period				
Name of Employer Omar Medical Supplies	Occupation Owner	50000.00				
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1055100.00	Memo Item				
B. Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address	Mailing Address					
City	State Zip Code	M-M / 10 CO / 7 Y V - Y - Y - Y - Y - Y - Y - Y - Y - Y				
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period					
Name of Employer	Occupation	The first of the f				
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date	Memo Item				
C. Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)					
Mailing Address	Mailing Address					
City	City State Zip Code					
FEC ID number of contributing federal political committee.	(C	Amount of Each Receipt this Period				
Name of Employer	Occupation					
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date	Memo Item				
Subtotal Of Receipts This Pag	e (optional)	50000.00				
Total This Period (last page this	s line number only)	المن المتحدد التي المتحدد التي التي التي التي التي التي التي التي				

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SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) 17b 19a 19b X 20a

PAGE 12 / 44

20c

20b

NAME OF COMMITTEE (In Full) Willie Wilson 2016					
A. Full Name (Last, First, Middle Initial) Bank of America Mailing Address P.O. BOX 851001	Transaction ID: A8EBF0DAF78444C30A98 Date of Receipt				
City Dallas	State Zip Code TX 75285-1001	03 31 2016			
FEC ID number of contributing federal political committee.	C	Refund from Bank of America Amount of Each Receipt this Period			
Name of Employer	Occupation	4923.84			
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 9857.45	Memo Item			
3. Full Name (Last, First, Middle Initial) Bank of America		Transaction ID : A9882FF53527E4117887 Date of Receipt			
Mailing Address P.O. BOX 851001	Mailing Address P.O. BOX 851001				
City Dallas	State Zip Code TX 75285-1001	Refund from Bank of America			
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period			
Name of Employer	Occupation	4933.61			
Receipt For: 2016 Primary General Other (specify) ▼	Election Cycle-to-Date 4933.61	Memo Item			
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)				
Mailing Address	Mailing Address				
City					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period			
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Election Cycle-to-Date	Memo Item			
Subtotal Of Receipts This Page (or	Subtotal Of Receipts This Page (optional)				
Total This Period (last page this line	e number only)	9857.45			

SCHEDULE B-P	Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 13 / 44
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 23 24 25 27b 28a 28b	26 27a 28c 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. Paypal Mailing Address 2221 North First Street City State Zip Code Transaction ID: BC3E17E575A574419BD1 CA San Jose 95131-2021 Purpose of Disbursement fees Amount of Each Disbursement this Period Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Memo Item Primary General Senate Other (specify) President Full Name (Last, First, Middle Initial) B. Faith Based Communication Inc Date of Disbursement Mailing Address 2250 S 14th Avenue City State Zip Code Transaction ID: B0656510A2DB1464EB35 60155-4002 Broadview IL Purpose of Disbursement Media Amount of Each Disbursement this Period Candidate Name Category/ 10000.00 Type Disbursement For: 2016 Office Sought: House Memo Item Primary Senate General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Paypal Mailing Address 2221 North First Street City State Zip Code Transaction ID: BF5195C8170194A7096D San Jose 95131-2021 Purpose of Disbursement fees Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: 2016 Memo Item Senate Primary General President Other (specify) State: Subtotal Of Receipts This Page (optional)..... Total This Period (last page this line number only))........

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FOR LINE NUMBER: PAGE 14 / 44 Use separate schedule(s) (check only one) for each category of the X 23 25 26 27a Detailed Summary Page 27b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. Rickey Hendon Mailing Address 2800 W. Washington Unit 202 City State Zip Code Transaction ID: B36EDA6DD94464AD4A45 Chicago 60612-1940 Purpose of Disbursement Consulting Amount of Each Disbursement this Period Candidate Name Category/ 6000.00 Type Disbursement For: 2016 Office Sought: House Memo Item Primary General Senate Other (specify) President District: Full Name (Last, First, Middle Initial) B. Terrell Wilson Date of Disbursement Mailing Address 123 Lester Road 01 City State Zip Code Transaction ID: B80F8D3C35CED4877B45 Park Forest 60466-2011 Purpose of Disbursement Consulting Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General Other (specify) President Full Name (Last, First, Middle Initial) Date of Disbursement c. Betty Jones Mailing Address 301 West Marquette Road Apt# 107 State Zip Code Chicago IL 60621-3891 Transaction ID: B2281A0BC79FF4A44953 Purpose of Disbursement Travel Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General Other (specify) President State: District: Subtotal Of Receipts This Page (optional)..... Total This Period (last page this line number only)).....

SCHEDULE B-P
ITEMIZED DISBURSEMENTS

\geq	NAME OF COMM Willie Wilsor	n 2016				
		irst, Middle Initial)			Data of Dishuranest	
Α.	Terrell Wilso	on			Date of Disbursement	
	Mailing Address	123 Lester Road	03 / 02 / 2016			
	City		State Zip Code		Transaction ID : B1E4A343010C8472D93F	
	Park Forest		IL 60466-2011			
	Purpose of Disbur Consulting	rsement			Amount of Each Disbursement this Period	
	Candidate Name			Category/ Type	1300.32	
	Office Sought:	House Senate President District:	Disbursement For: 2016 ☐ Primary ☐ Genera Other (specify) ▼	I	Memo Item	
		First, Middle Initial)				
В.	Louis Young	9			Date of Disbursement	
	Mailing Address	530 Piedmont			03 02 2016	
		Suite#114	Clade 7in Code			
	City		State Zip Code		Transaction ID: BA4827F604D2E439EB3E	
	Atlanta	roomant	GA 30308-4404	· 		
	Purpose of Disbur Convention space	e			Amount of Each Disbursement this Period	
	Candidate Name				850.00	
	Office Sought:	House Senate President District:	Disbursement For: 2016 Primary General Other (specify)	I	Memo Item	
		First, Middle Initial)				
C.	Gossip Gen		Date of Disbursement			
	Mailing Address 1546 N. Orleans #1006				03 / 02 / 2016	
	City		State Zip Code			
	Chicago		IL 60610-2490		Transaction ID : BC042A51C14E842B4A39	
	Purpose of Disbur Consulting: Adve	rsement rtising & PR	Amount of Each Disbursement this Period			
	Candidate Name		2000.00			
	Office Sought:	House Senate President District:	Disbursement For: 2016 Primary General Other (specify)	I	Memo Item	
			optional)		4150.32	
ı	Total This Perio	od (last page this li	ne number only))			

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Willie Wilson 2016

L				
	Full Name (Last, First, Middle Initial)			
A.	Ringold Financial Management Services	Date of Disbursement		
	Mailing Address 850 S. Wabash #320	03 02 / 2016		
	City State Zip Code	Transaction ID : BCFB4B772E77A47D2B20		
	Chicago IL 60605-3642			
	Purpose of Disbursement Accounting Services Candidate Name	Amount of Each Disbursement this Period		
	Candidate Name Category/ Type	2600.00		
	Office Sought: House Disbursement For: 2016 Senate Primary General President Other (specify) ▼	Memo Item		
	State: District:			
_	Full Name (Last, First, Middle Initial)			
В.	Authorize.Net (Utah)	Date of Disbursement		
	Mailing Address P.O. Box 947	03 / 2016		
	City State Zip Code	Transaction ID : B378DC8FE1DC0467F82C		
	American Fork UT 84003-0947			
	Purpose of Disbursement Payment Processing Fee	Amount of Each Disbursement this Period		
	Candidate Name Category/ Type	25.00		
	Office Sought: House Disbursement For: 2016 Senate Primary General Other (specify) ▼	Memo Item		
_	State: District:			
	Full Name (Last, First, Middle Initial)	Data of Dishusansant		
C.	Metro Monitor	Date of Disbursement		
	Mailing Address 612 37th Street South	03 04 2016		
	City State Zip Code			
	Birmingham AL 35222-3204	Transaction ID: B4E3BD5451AA74321901		
	Purpose of Disbursement TV News Monitoring Fee	Amount of Each Disbursement this Period		
	Candidate Name Category/ Type	350.00		
	Office Sought: House Disbursement For: 2016 Senate Primary General Other (specify) State: District:	· Memo Item		
	Subtotal Of Receipts This Page (optional)	2975.00		
l	Total This Period (last page this line number only))			

SCHEDULE B	-P
ITEMIZED DIS	BURSEMENTS

FOR LINE NUMBER: PAGE 17 / 44 Use separate schedule(s) (check only one) for each category of the $X|_{23}$ 24 25 26 27a Detailed Summary Page

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. Dawn Hendon M - M / D - D A_A_A_A_A_A_A Mailing Address 901 Lake 04 Transaction ID: B3D6FD4AE4B99498285A City State Zip Code Oak Park ΙL 60303-1000 Purpose of Disbursement Consulting Amount of Each Disbursement this Period Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Memo Item Senate Primary General Other (specify) President State: Full Name (Last, First, Middle Initial) B. Kashia Johnson Date of Disbursement Mailing Address 3327 W. Beltine City State Zip Code Transaction ID: BEE8012599C94453E857 Columbia 29204 SC Purpose of Disbursement Media Amount of Each Disbursement this Period Candidate Name Category/ 1000.00 Туре Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General Other (specify) President District: Full Name (Last, First, Middle Initial) c. Terrell Wilson Date of Disbursement Mailing Address 123 Lester Road City State Zip Code Transaction ID: B1C6DB9560F4F4CA38D5 Park Forest 60466-2011 Purpose of Disbursement Consulting Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Primary General Senate Other (specify) President State: District: Subtotal Of Receipts This Page (optional)..... 2802.41 Total This Period (last page this line number only)).....

FOR LINE NUMBER: SCHEDULE B-P PAGE 18 / 44 Use separate schedule(s) (check only one) for each category of the X 23 ITEMIZED DISBURSEMENTS 25 26 27a **Detailed Summary Page** 27b 28a 28b 28c Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) A. Morris Consulting Date of Disbursement D - D Mailing Address 9249 S. Cicero #539 Transaction ID : BE4FB094DED4246F1B71 City State Zip Code IL Oak Lawn 60454-4924 Purpose of Disbursement Consulting Fees Amount of Each Disbursement this Period Candidate Name Category/ 1500.00 Type ا وَكَانِيَا مِنْ مِنْ مِنْ الْمِنْ مِنْ الْمِنْ مِنْ الْمِنْ مِنْ الْمِنْ مِنْ الْمِنْ مِنْ الْمِنْ مِنْ 2016 Disbursement For: Office Sought: House Memo Item Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) WFLD WPWR Date of Disbursement D - D Mailing Address 205 N. Michigan Ave. City State Zip Code Transaction ID: B09E95501511D4123B28 Chicago 60601-5927 Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ 7029.50 Type Office Sought: House Disbursement For: 2016 Memo Item Senate Primary General President Other (specify) District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Paypal Mailing Address 2221 North First Street City State Zip Code CA 95131-2021 Transaction ID: B4253724B4F6A4F0A9B5 San Jose Purpose of Disbursement fees Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General Other (specify) President District: State: Subtotal Of Receipts This Page (optional)..... 8530.53 Total This Period (last page this line number only)).....

SCHEDULE B-P	Use separate schedule(s)	FOR LINE NUMBER: (check only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	× 23

PAGE 19 / 44 26 27a 28b | _____27b _____28a _ Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. First Community Financial Bank D - D - / [Y - Y - Y - Y - Y - Y - Y Mailing Address 14150 U.S. 30 Zip Code City State Transaction ID: B177797B5B92348FC9D6 Plainfield IL 60544 Purpose of Disbursement Paid item fees Amount of Each Disbursement this Period Candidate Name Category/ 64.00 Type 2016 Office Sought: Disbursement For: House Memo Item Primary General Senate President Other (specify) State: District Full Name (Last, First, Middle Initial) B. First Community Financial Bank Date of Disbursement Mailing Address 14150 U.S. 30 City State Zip Code Transaction ID: BB5C0AB8959324D6A94C 60544 Plainfield IL Purpose of Disbursement Overdraft fee Amount of Each Disbursement this Period Candidate Name Category/ 5.00 Type Office Sought: Disbursement For: House Memo Item Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Paypal Mailing Address 2221 North First Street City State Zip Code San Jose CA 95131-2021 Transaction ID: BC2B8AE5A47254CBBB60 Purpose of Disbursement fees Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General President Other (specify) District: State: Subtotal Of Receipts This Page (optional)..... 69.59 Total This Period (last page this line number only)).....

SCHEDULE B-P
ITEMIZED DISBURSEMENTS

FOR LINE NUMBER: PAGE 20 / 44 Use separate schedule(s) (check only one) for each category of the X 23 24 25 26 27a Detailed Summary Page 28a 28b 28c

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) A. ABC National Sales Date of Disbursement MYMI / DYD Mailing Address 4100 City Ave City State Zip Code Transaction ID: B1F009BC5358F4A9C806 Philadelphia PΑ 19131-1610 Purpose of Disbursement Media Amount of Each Disbursement this Period Candidate Name Category/ 7862.50 Type Disbursement For: 2016 Office Sought: House Memo Item Senate Primary General Other (specify) President District: Full Name (Last, First, Middle Initial) B. Kashia Johnson Date of Disbursement Mailing Address 3327 W. Beltine 2016 08 City State Zip Code Transaction ID: BE25638CB28554588853 Columbia SC 29204 Purpose of Disbursement Media Amount of Each Disbursement this Period Candidate Name Category/ 1000.00 Type Office Sought: Disbursement For: 2016 House Memo Item Primary General Senate Other (specify) President District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Rickey Hendon Mailing Address 2800 W. Washington Unit 202 City State Zip Code Transaction ID: BC7E3076E72B2482EBA5 IL Chicago 60612-1940 Purpose of Disbursement Consulting Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: 2016 House Memo Item Senate Primary General President Other (specify) State: District: Subtotal Of Receipts This Page (optional)..... 14862.50 Total This Period (last page this line number only)).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				:	PAGE 21 / 44				
(check only one)				L					
X 23 24 25					25		26		27a
	27b		28a		28b		28c		29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. First Community Financial Bank D U D V 7.4 V 7.1.1 V 7.1.1 Mailing Address 14150 U.S. 30 City State Zip Code Transaction ID: B8FBEEACCDD5B450ABAE Plainfield 60544 Purpose of Disbursement Charge back fee for 50k check Amount of Each Disbursement this Period Candidate Name Category/ 5.00 Type Office Sought: Disbursement For: 2016 House Memo Item Primary General Senate President Other (specify) District: Full Name (Last, First, Middle Initial) Morris Consulting Date of Disbursement Mailing Address 9249 S. Cicero #539 2016 City Zip Code State Transaction ID: B6EF30635FB7942C4B88 60454-4924 Oak Lawn IL Purpose of Disbursement Consulting Fees Travel Amount of Each Disbursement this Period Candidate Name Category/ 168.00 Type Office Sought: Disbursement For: 2016 House Memo Item Primary General Senate Other (specify) President District: Full Name (Last, First, Middle Initial) c. Victory Research Date of Disbursement Mailing Address 140 S. Huron City State Zip Code Transaction ID: B7CF7F546536B4CA19FF Westmont IL 60559 Purpose of Disbursement Consulting Fees Amount of Each Disbursement this Period Candidate Name Category/ 922.89 Type Office Sought: Disbursement For: 2016 House Memo Item Primary Senate General Other (specify) President District: State: Subtotal Of Receipts This Page (optional)..... 1095.89 Total This Period (last page this line number only)).....

SCHEDULE B-P ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

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X 23 24 25							26		27a
	27b		28a		28b		28c		29

\rangle	Willie Wilson 2016		
<u>/</u> А.	Full Name (Last, First, Middle Initial) SPD Press		Date of Disbursement
	Mailing Address 1444 W. 37th Street		03 14 2016
	City State Zip Code Chicago IL 60609-2112		Transaction ID : BBC4A60347FBB4B8481A
	Purpose of Disbursement Advertising		Amount of Each Disbursement this Period
	Candidate Name	Category/ Type	55.12
	Office Sought: House Disbursement For: 2016 Senate President Other (specify) ▼ State: District:		Memo Item
	Full Name (Last, First, Middle Initial)		
В.	Paypal		Date of Disbursement
	Mailing Address 2221 North First Street		03 / 14 / 2016
	City State Zip Code		Transaction ID : B05D1E3A0AC3242FBAAE
	San Jose CA 95131-2021		
	Purpose of Disbursement fees		Amount of Each Disbursement this Period
	Candidate Name	Category/ Type	14.80
	Office Sought: House Disbursement For: 2016 Senate President Other (specify)		Memo Item
	State: District:		
	Full Name (Last, First, Middle Initial)		
C.	Morris Consulting		Date of Disbursement
	Mailing Address 9249 S. Cicero #539		03 22 2016
	City State Zip Code Oak Lawn IL 60454-4924		Transaction ID : BCC34BA2C9DCB40BD965
	Purpose of Disbursement Consulting Fees		
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)	i ypc	Memo Item
	State: District:		
	Subtotal Of Receipts This Page (optional)		3069.92
	Total This Period (last page this line number only))		

SCHEDULE B-P
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) Willie Wilson 2016 Full Name (Last, First, Middle Initial) Date of Disbursement A. First Community Financial Bank D W D Mailing Address 14150 U.S. 30 City State Zip Code Transaction ID: B2317F4D78F7F4E89B58 Plainfield ΙL 60544 Purpose of Disbursement Stop payment Fee Amount of Each Disbursement this Period Candidate Name Category/ Type Disbursement For: 2016 Office Sought: House Memo Item Senate Primary General Other (specify) President Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: House Disbursement For: Memo Item Senate Primary General Other (specify) President State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Purpose of Disbursement Amount of Each Disbursement this Period Candidate Name Category/ Type Office Sought: Disbursement For: House Memo Item Senate Primary General Other (specify) President District: State: Subtotal Of Receipts This Page (optional)..... Total This Period (last page this line number only))..... 55006.00

SCHEDULE C-P

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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لنا	19a		719

NAME OF COMMITTEE (In Full)

Transaction ID : C7458D54E6F034E64B03

LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		Memo Item Election: 2016
Or. Willie Wilson				Primary General
Mailing Address 345 E. Wacker Unit 4601				Other (specify)
City		State	ZIP Code	
Chicago		IL	60601-5275	
Original Amount of Loan		Cumulative Payme	ent To Date	Balance Outstanding at Close of This Peri
25	5000.00		0.00	25000.00
TERMS Date Incurred		Da	te Due	Interest Rate Secured:
02 ^M / 29 ^D / Y	2016	^M 02 ^M / ^D 29 ^D	2016	300.00 % (apr) Yes
List All Endorsers or Guar	antors (if an	y) to Loan Sour	ce	
1. Full Name (Last, First, Mic	ddle Initial)		Name of Emp	ployer
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Mid-	dle Initial)		Name of Emp	ployer
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Mid-	dle Initial)		Name of Emp	ployer
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Mid-	dle Initial)		Name of Emp	ployer
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	<u> </u>
ubtotal Of Receipts This Pa	ige (optional)			25000.00
	J: (-p.:-:.ai)			25000.00
otal This Period (last page t	his line numb	er only)		>
orny autotandina halanaa asky ta	LINE 2 Caboo	tula D. for this line	If no Schodula D. corr	ry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 25 / 44

Transaction ID: CEF8421D60BAE401B8F8

FOR LINE NUMBER: (check only one)

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NAME C	OF COMMI	ILIFF	(In	Full)
Willie	Wilson	201	6	

Villie Wilson 2016		
LOAN SOURCE Full Name (Last, First	, Middle Initial)	Memo Item Election: 2016
Dr. Willie Wilson		Primary General
Mailing Address	- -	Other (specify) ▼
345 E. Wacker Unit 4601		
City	State ZIP	Code
Chicago	IL 606	01-5275
Original Amount of Loan	Cumulative Payment	
40000.00		0.00 40000.00
TERMS Date Incurred	Date D	Due Interest Rate Secured:
Mog / P22° / Y žoiš Y	Mo9 M / 22 P /	Y Ž016 300.00 % (apr) Yes ⊠ No
List All Endorsers or Guarantors (if	f any) to Loan Source	
1. Full Name (Last, First, Middle Initial))	Name of Employer
Mailing Address		Occupation
		Amount
City Star	te ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Sta	te ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Sta	te ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Sta	te ZIP Code	Guaranteed Outstanding:
Subtotal Of Receipts This Page (option	nal)	40000.00
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Total This Period (last page this line n	umber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)
Willie Wilson 2016

Transaction ID: C4804906CC4544DB0BB2

/illie Wilson 2016		
LOAN SOURCE Full Nam Dr. Willie Wilson	ne (Last, First, Middle Initial)	Memo Item Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601		Other (specify) ▼
City	State	ZIP Code
Chicago	IL	60601-5275
Original Amount of Loan	Cumulative Paym	ent To Date Balance Outstanding at Close of This Period
	25000.00	0.00 25000.00
Date Incur	red D Y 2016 Y 01 M 1 P 12 P	ate Due Interest Rate Secured: Y 2017 Y 300.00 % (apr) Yes No.
List All Endorsers or C	Suarantors (if any) to Loan Sou	ce
1. Full Name (Last, First,	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First,	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First,	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First,	Middle Initial)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding:
subtotal Of Receipts This	s Page (optional)	25000.00
otal This Period (last pa	ge this line number only)	
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Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: CD33FEF167F914A9EA26

FOR LINE NUMBER: (check only one) **X**_{19a}

NAME OF COMMITTEE (In Full) W

Villie Wilson 2016	,		
LOAN SOURCE Full Name Dr. Willie Wilson	e (Last, First, Mi	ddle Initial)	Memo Item Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601			Other (specify) ▼
City		State	ZIP Code
Chicago		IL	60601-5275
Original Amount of Loan		Cumulative Paym	
	20000.00		0.00 20000.00
TERMS			late Due Coourad
Date Incurred	2015	Mo7 M / 060	ate Due Interest Rate Secured: y 2016 300.00 % (apr) Yes No
List All Endorsers or Gu	arantors (if ar	y) to Loan Sou	rce
1. Full Name (Last, First, I	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	liddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	liddle Initial)		Name of Employer
Mailing Address	 ,		Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	liddle Initial)	·	Name of Employer
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
Subtotal Of Receipts This	Page (optional)		20000.00
Total This Period (last page	e this line numl	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

NAME OF COMMITTEE (In Full)
Willie Wilson 2016

Transaction ID : C256CAA590DFF4E87827

LOAN SOURCE Full Name (Last	, First, Middle Initial)	Memo Item Election: 2016
Dr. Willie Wilson		Primary General
Mailing Address 345 E. Wacker Unit 4601		Other (specify) ▼
		770.0
City		ZIP Code 60601-5275
Chicago		
Original Amount of Loan	Cumulative Payme	_
100000		0.00
TERMS Date Incurred	Dat	e Due Interest Rate Secured:
M 10 / P 05 / Y 2018	M10 M / P05 P	/ 2016 300.00 % (apr)
List All Endorsers or Guarant	ors (if any) to Loan Source	e
1. Full Name (Last, First, Middle	Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle	nitial)	Name of Employer
Mailing Address	 	Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle	nitial)	Name of Employer
Mailing Address	- 101	Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle	nitial)	Name of Employer
Mailing Address		Occupation
		Amount g
City	State ZIP Code	Guaranteed Outstanding:
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Use separate schedule(s) for each category of the Detailed Summary Page

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Villie Wilson 2016		
LOAN SOURCE Full Name (La	st, First, Middle Initial)	Memo Item Election: 2016
Dr. Willie Wilson		Primary General
Mailing Address		Other (specify) ▼
345 E. Wacker Unit 4601		
City	State	ZIP Code
Chicago	IL	60601-5275
Original Amount of Loan	Cumulative Payrr	
500	00.00	0.00 50000.00
TERMS Date Incurred		Date Due Interest Rate Secured:
M 06 Y 22 Y 20	15 \	′ Yon Ďemand 0.00 % (apr) Yes ⊠ No
List All Endorsers or Guara	ntors (if any) to Loan Sou	irce
1. Full Name (Last, First, Midd	le Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle	e Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle	e Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middl	e Initial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
Subtotal Of Receipts This Pag	e (optional)	50000.00
otal This Period (last page thi	s line number only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: C43B8173ABB0F4FB88AA

FOR LINE NUMBER: (check only one)

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	13a	-	113

NAME OF COMMITTEE (In Full) W

Villie Wilson 2016								
LOAN SOURCE Full Nam Dr. Willie Wilson	e (Last, First, M	iddle Initial)			Memo Item	Election: 2016 Primary General		
Mailing Address 345 E. Wacker Unit 4601				-		Other (specify	r) ▼	
City		State	ZIP Cod	de				
Chicago		IL	60601-5	275				
Original Amount of Loan		Cumulative Pa		ate		ce Outstanding at C	lose of This Peri	od
- 4	150000.00			0.00	14		150000.00	
TERMS Date Incurre	ed		Date Due		Interest Rate	,	Secured:	
M 12 / 03 / Y	Ž015 Ÿ	M12 M / 00	3 ^D / Y	Ž016 Y	300.0		Yes X	No
List All Endorsers or Gu	uarantors (if ar	ny) to Loan So	ource					
1. Full Name (Last, First,	Middle Initial)			Name of Em	ployer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:			() () () () () () () () () ()	
2. Full Name (Last, First, M	Middle Initial)			Name of Em	ployer			_
Mailing Address			,	Occupation				_
City	State	ZIP Code		Amount Guaranteed Outstanding:				
3. Full Name (Last, First, M	Middle Initial)			Name of Em	ployer			_
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		-5-1-5-1		
4. Full Name (Last, First, N	Middle Initial)			Name of Em	ployer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding	7	-5 ⁰ 5		
Subtotal Of Receipts This	Page (optional)			\	15	50000.00	
Total This Period (last pag	e this line num	ber only)						

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

×	19a	19b

Transaction ID: C2F0B174DB0BE4DBBBD1 NAME OF COMMITTEE (In Full) Willie Wilson 2016 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Memo Item 2016 Primary Dr. Willie Wilson General Mailing Address Other (specify) 345 E. Wacker Unit 4601 City State ZIP Code 60601-5275 IL Chicago Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 50000.00 0.00 TERMS Date Due Secured: 300.00 2016 2015 Yes 🔀 No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State City Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City ZIP Code State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code City State Guaranteed Outstanding: Subtotal Of Receipts This Page (optional)..... Total This Period (last page this line number only).....

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)

Transaction ID: C43A35BF5B85C40FC8E1

/illie Wilson 2016					
LOAN SOURCE Full Name Dr. Willie Wilson	e (Last, First, Middle	Initial)		Memo Item	Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601					Other (specify) ▼
City	Stat	e ZIP C	Code		
Chicago	IL.	6060	1-5275		
Original Amount of Loan	Cum	ulative Payment To			e Outstanding at Close of This Period
II.	100000.00		0.00		100000.00
Date Incurre	d 	Date Du	e Y 2015	Interest Rate	
List All Endorsers or Gu	uarantors (if any) to	Loan Source			
1. Full Name (Last, First, I	Middle Initial)		Name of Em	ployer	
Mailing Address			Occupation		
City	State ZI	P Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	liddle Initial)		Name of Em	ployer	
Mailing Address			Occupation		
City	State ZI	P Code	Amount Guaranteed Outstanding:		-y^-y^-
3. Full Name (Last, First, M	liddle Initial)		Name of Em	ployer	
Mailing Address			Occupation		
City	State Z	P Code	Amount Guaranteed Outstanding:		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
4. Full Name (Last, First, N	fiddle Initial)		Name of Em	ployer	
Mailing Address			Occupation		
City	State Z	P Code	Amount Guaranteed Outstanding:		<u> </u>
ubtotal Of Receipts This	Page (optional)			>	100000.00
otal This Period (last page	e this line number or	ıly)		>	,
earry outstanding halance only	to LINE 3. Schedule C) for this line. If no	Sahadula D. sari	ry forward to	appropriate line of Summers

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: C864923645EFE4219A9D

FOR LINE NUMBER: (check only one) × 19

	\Box	
а		19b

NAME C	OF COMMI	ITTEE (In	Full)
Willie	Wilson	2016	

/illie Wilson 2016						
LOAN SOURCE Full Name (La Dr. Willie Wilson	st, First, Middle Initial)			Memo Item	Election: 2016 Primary General	
Mailing Address 345 E. Wacker Unit 4601					Other (specify	/) ▼
City	State	ZIP Cod				
Chicago	IL	60601-5	.275 			
Original Amount of Loan	Cumulative	Payment To D	ate	Balanc	e Outstanding at C	Close of This Period
5000	00.00	<u></u>	0.00			50000.00
Date Incurred	15 Y M12 M	Date Due	Ž016 Y	Interest Rate		Secured:
List All Endorsers or Guaran	ntors (if any) to Loan	Source				
1. Full Name (Last, First, Midd	le Initial)	•	Name of Em	ployer		
Mailing Address			Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle	e Initial)		Name of Em	ployer		
Mailing Address			Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:		<u> </u>	-1-a-1
3. Full Name (Last, First, Middle	e Initial)		Name of Em	ployer		
Mailing Address		· <u>-</u>	Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:		7=1-1-1	
4. Full Name (Last, First, Middle	e Initial)		Name of Em	ployer		
Mailing Address			Occupation			
City	State ZIP Coo	de	Amount Guaranteed Outstanding:		√ŋ <u></u>	
ubtotal Of Receipts This Pag	e (optional))	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	50000.00
otal This Period (last page this	s line number only)]		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 34 / 44

OR LINE NUMBER: X 198 19h

.OANS	the Detailed Summary Page		FOR	LINE NUMBER: X 19a 19b
AME OF COMMITTEE (In Full) Willie Wilson 2016			Transa	ction ID : CDF976F5A83C4417DA53
LOAN SOURCE Full Name (Last, First Dr. Willie Wilson Mailing Address 345 E. Wacker Unit 4601	, Middle Initial)	Me	emo Item	Election: 2016 Primary General Other (specify) ▼
City	State ZIP Co			
Original Amount of Loan	Cumulative Payment To [Outstanding at Close of This Period
TERMS Date Incurred Mo9 / P10 / Y 2015	Date Due	Inte Ž016 Y	erest Rate 300.00	Secured: % (apr) Yes No
List All Endorsers or Guarantors (if				
Full Name (Last, First, Middle Initial)		Name of Employ	er	
Mailing Address		Occupation		
City Stat	re ZIP Code	Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employ	er	
Mailing Address		Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	_	9
3. Full Name (Last, First, Middle Initial)		Name of Employ	er	
Mailing Address		Occupation		
City Stat	te ZIP Code	Amount Guaranteed Outstanding:		<u>, , , , , , , , , , , , , , , , , , , </u>
4. Full Name (Last, First, Middle Initial)		Name of Employ	er	
Mailing Address		Occupation		
City State	te ZIP Code	Amount Guaranteed Outstanding:	=	5 6
Subtotal Of Receipts This Page (optio	nal)	\ [30000.00
Total This Period (last page this line no	umber only)	> [<u> </u>

Dr. Willie Wilson

Mailing Address

City

Chicago

TERMS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 35 / 44

NAME OF COMMITTEE (In Full) Willie Wilson 2016

345 E. Wacker Unit 4601

Original Amount of Loan

Mailing Address

Mailing Address

Mailing Address

Mailing Address

City

City

City

City

Date Incurred

1. Full Name (Last, First, Middle Initial)

2. Full Name (Last, First, Middle Initial)

3. Full Name (Last, First, Middle Initial)

4. Full Name (Last, First, Middle Initial)

100.00

State

State

State

State

Total This Period (last page this line number only).....

FOR LINE NUMBER: X _{19a} (check only one) Transaction ID: C37B5BB3BACAE43ADBB6 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary General Other (specify) ZIP Code State IL 60601-5275 Cumulative Payment To Date Balance Outstanding at Close of This Period 100.00 0.00 Interest Rate Secured: Date Due 0.00 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer Occupation Amount ZIP Code Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed ZIP Code Outstanding: Name of Employer Occupation Amount Guaranteed ZIP Code Outstanding: Name of Employer Occupation Amount ZIP Code Guaranteed Outstanding: Subtotal Of Receipts This Page (optional)..... 100.00

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 36 / 44

FOR LINE NUMBER: (check only one)

X 19a	□ ₁₉
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NAN W

AME OF COMMITTEE (In Full) Villie Wilson 2016		Transaction ID : CF0B87667BCBA420D9
LOAN SOURCE Full Name (Last, Dr. Willie Wilson	First, Middle Initial)	Memo Item Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601		Other (specify) ▼
City	State ZIF	P Code
Chicago	IL 60	601-5275
Original Amount of Loan	Cumulative Payment	
25000.0	27 11 11 7	0.00 25000.00
TERMS Date Incurred	Date	Due Interest Rate Secured:
M01M / 22° / Y 2016	M 1 D 22 /	7 2016
List All Endorsers or Guaranto	rs (if any) to Loan Source	
Full Name (Last, First, Middle I	nitial)	Name of Employer
Mailing Address		Occupation
•		Amount
City	State ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)	Name of Employer
Mailing Address		Occupation
		Amount
City	State ZIP Code	Guaranteed Outstanding:
Subtotal Of Receipts This Page (optional)	25000.00
- 3 (•	2000.00
Total This Period (last page this li	ne number only)	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 37 / 44

FOR LINE NUMBER: (check only one) NAME OF COMMITTEE (In Full) Willie Wilson 2016

Transaction ID : CCE33AC88DA49462E8F0

LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2016
Dr. Willie Wilson		Primary General
Mailing Address		General Other (specify) ▼
345 E. Wacker Unit 4601		
City	State ZIF	' Code
Chicago	IL 60	601-5275
Original Amount of Loan	Cumulative Payment	
100000.00		0.00
TERMS Date Incurred	Date	Due Interest Rate Secured:
M07M / P21P / Y 2015 Y	07 M / 21 D /	(apr) Yes No
List All Endorsers or Guarantors (if	any) to Loan Source	
1. Full Name (Last, First, Middle Initial)	THE CONTRACT	Name of Employer
Mailing Address		Occupation .
		Amount
City State	e ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Stat	e ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Stat	e ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address	·	Occupation
		Amount
City Stat	e ZIP Code	Guaranteed Outstanding:
Subtotal Of Receipts This Page (option	nal)	
outotal of ricocipis fins rage (option	ш.	100000.00
Total This Period (last page this line nu	mber only)	
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 38 / 44

FOR LINE NUMBER: X 19a 19b

ME OF COMMITTEE (In Full)				tion ID : C068C97725DFD4D338E9
LOAN SOURCE Full Name Dr. Willie Wilson	(Last, First, Mic	ddle Initial)		Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601				Other (specify) ▼
City Chicago			Code 01-5275	
Original Amount of Loan	70000.00	Cumulative Payment	0.00	Outstanding at Close of This Period 70000.00
Date Incurred		Date	Jue Interest Rate Y 2017 300.00	Secured: "" (apr) Yes X No
List All Endorsers or Gu 1. Full Name (Last, First, N		y) to Loan Source	Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City .	State	ZIP Code	Amount Guaranteed Outstanding:	\
4. Full Name (Last, First, M	iddle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
ubtotal Of Receipts This	Page (optional).		> [70000.00
otal This Period (last page	this line numb	er only)	•	, , , , , , , , , , , , , , , , , , ,
arry outstanding balance only	to LINE 3. Sched	lule D. for this line. If i	o Schedule D, carry forward to ap	poropriate line of Summary

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 39 / 44

Transaction ID: CF04F64B43C8D4B44A88

FOR LINE NUMBER: (check only one)

×	19a	19	t
			٠

NAME C	F	COMM	ITTEE	(In	Full)
Willie	W	/ilson	201	6	

LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2016 Primary Dr. Willie Wilson General Mailing Address Other (specify) -345 E. Wacker Unit 4601 City State ZIP Code 60601-5275 IL Chicago Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 70000.00 0.00 70000.00 **TERMS** Date Due Interest Rate Secured: Date Incurred 300.00 M 02M 2017 2016 Yes 🔀 No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code State City Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: Subtotal Of Receipts This Page (optional)....... 70000.00 Total This Period (last page this line number only).....

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 40 / 44

FOR LINE NUMBER:

X	19a	19
	ıısa	 112

NAME OF COMMITTEE (In Full)

(check only one) Transaction ID: C9E900428BD3D4CD68F9

LOAN SOURCE Full Nam Dr. Willie Wilson	e (Last, First, Middle Ir	nitial)		Memo Item	Election: 2016 Primary	
or. Willie Wilson					General	
Mailing Address 345 E. Wacker Unit 4601					Other (specify) ▼	
 City	State	e ZIP C	ode			
Chicago	IL	. 60601	-5275			
Original Amount of Loan		lative Payment To			e Outstanding at Close of Thi	s Peric
	5000.00		0.00		5000.0	
TERMS						
Date Incurre	2016 Y MO1 M	Date Due	Ž017 Y	Interest Rate		i:
List All Endorsers or Gu	uarantors (if any) to	Loan Source				
1. Full Name (Last, First,	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation			
			Amount			
City	State ZIF	² Code	Guaranteed Outstanding:	ļ	المستقدية والمستعدود	
2. Full Name (Last, First, N	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation			
			Amount	***		
City	State ZIF	P Code	Guaranteed Outstanding:	il .		
3. Full Name (Last, First, N	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation	<u> </u>		
			Amount			
City	State ZIF	P Code	Guaranteed Outstanding:		<u></u>	
4. Full Name (Last, First, N	Middle Initial)		Name of Em	ployer		
Mailing Address			Occupation			
			Amount	المراجع الما		
City	State ZIF	P Code	Guaranteed Outstanding:		<u> </u>	
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		ly)				=7]

SCHEDULE C-P

PAGE 41 / 44

LOANS	Use separate schedule(s) for the Detailed Summer	
NAME OF COMMITTEE (In Full) Willie Wilson 2016		Transaction ID : C4C671724E38B494C9D5
LOAN SOURCE Full Name (Last, First Dr. Willie Wilson	t, Middle Initial)	Memo Item Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601		Other (specify) ▼
City	State ZIP C	Code
Chicago	IL 6060	
Original Amount of Loan		
TERMS Date Incurred	Date Du	ue Interest Rate Secured:
M 10 / P 27 / Y 2015	M10 M / P27 C	y 2016 300.00 % (apr) Yes ⊠ N
List All Endorsers or Guarantors (i	if any) to Loan Source	
1. Full Name (Last, First, Middle Initia	l)	Name of Employer
Mailing Address		Occupation
		Amount
City Sta	ate ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City Sta	ate ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
· · · · · · · · · · · · · · · · · · ·		Amount Guaranteed
City Sta	ate ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:
Subtotal Of Receipts This Page (option	onal)	20000.00
Total This Period (last page this line r	number only)	

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 42 / 44

FOR LINE NUMBER: (check only one)

X _{19a}	19
------------------	----

NAN Wi

IAME OF COMMITTEE (In F Willie Wilson 2016	ull)			Transaction ID : CC9AC7369E8374F2BAAE
LOAN SOURCE Full Nar Dr. Willie Wilson	me (Last, First, M	liddle Initial)	Me	mo Item Election: 2016 Primary General
Mailing Address 345 E. Wacker Unit 4601				Other (specify)
City		State	ZIP Code	
Chicago			60601-5275	
Original Amount of Loan		Cumulative Payme		Balance Outstanding at Close of This Period
	50000.00	1.1.1.1	0.00	50000.00
TERMS Date Incur	red	Dat	e Due Inter	est Rate Secured:
M 03 / 14 /	Ž016	03 M / 14 D	' Ž017 Y	300.00
List All Endorsers or C	Guarantors (if a	ny) to Loan Source	:e	
1. Full Name (Last, First	, Middle Initial)	<u></u>	Name of Employe	er
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First,	Middle Initial)	<u></u>	Name of Employe	er .
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed Q Outstanding:	
3. Full Name (Last, First,	Middle Initial)		Name of Employe	er
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	. ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^ ^
4. Full Name (Last, First,	Middle Initial)		Name of Employe	er
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	
Subtotal Of Receipts Thi	s Page (optional)	> [50000.00
Total This Period (last pa	ge this line num	ber only)	> [

Dr. Willie Wilson

Mailing Address

City

Chicago

TERMS

M 02M

City

City

City

City

Use separate schedule(s) for each category of the Detailed Summary Page

> ZIP Code 60601-5275

Date Due

2016

Cumulative Payment To Date

State

PAGE 43 / 44

FOR LINE NUMBER: (check only one)

X 19a	19
L19a	L 13

NAME OF COMMITTEE (In Full) Willie Wilson 2016

345 E. Wacker Unit 4601

Original Amount of Loan

Mailing Address

Mailing Address

Mailing Address

Mailing Address

LOAN SOURCE Full Name (Last, First, Middle Initial)

50000.00

2016

List All Endorsers or Guarantors (if any) to Loan Source

State

State

State

State

ZIP Code

ZIP Code

ZIP Code

ZIP Code

Date Incurred

10

1. Full Name (Last, First, Middle Initial)

2. Full Name (Last, First, Middle Initial)

3. Full Name (Last, First, Middle Initial)

4. Full Name (Last, First, Middle Initial)

Transaction ID: CB0C294386C204D94AB8 Election: 2016 Memo Item Y Primary General Other (specify) \(\nspecify \) Balance Outstanding at Close of This Period 0.00 50000.00 Secured: Interest Rate 300.00 Yes X No % (apr) Name of Employer Occupation Amount Guaranteed Outstanding:
Subtotal Of Receipts This Page (optional)...... 50000.00 Total This Period (last page this line number only).......

SCHEDULE	C-P
LOANS	

Use separate schedule(s) for each category of the Detailed Summary Page

14 To 12	PAGE 4		
FOR LINE NI	JMBER: only one)	× 19a	

the Detailed Summary Page Transaction ID: CD18D69B26195434285D NAME OF COMMITTEE (In Full) Willie Wilson 2016 LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Dr. Willie Wilson General Mailing Address Other (specify) -345 E. Wacker Unit 4601 City State ZIP Code IL 60601-5275 Chicago Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 25000.00 25000.00 **TERMS** Secured: Interest Rate M 08^M 300.00 2016 2015 Yes 🔀 No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: Subtotal Of Receipts This Page (optional).... Total This Period (last page this line number only)...... 1055100.00

The following items are bills paid or to be paid with the remaining \$15,956.54.

Outstanding Check	1226	Vinia Alston/Catering	\$ 1,000.00	
Outstanding Check	1293	Willie Wilson loan reimbursement	\$ 10,000.00	
Cleared in April	1290	Nation Builders	\$ 49.00	
Cleared in April	•	Billing Authnet gateway	\$ 25.00	
Cleared in April	1292	Aristole 360	\$ 1,500.00	
Checks to cut		Ringold	\$ 2,600.00	march
Thecks to cut		Ringold	\$ 1,100.00	april estimate
Checks to cut		Aristole 360 final bill	\$ 1,500.00	May
Checks to cut				

Total

\$ 17,774.00

User Defined Fields

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Basic Information	·						: Perform one of the functions by clicking on t links below:
Legislative Office:	Capitol ▼	Phone: 3	129254354] [Select Photo	Add Receipt
Address Name:	345 E. Wacker	Fax:]		Add Disbursement
Line 1:		Email: W	wilson@or	narinc.com			Add Pledge
Line 2:		Website:] \		Add Note
Line 3:		Twitter:			j		Log Phone Call
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. City:	Chicago	Facebook:			<u> </u>		Log Direct Mail
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Receipts						Click to Expand (Hide)	4/27
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<u>&</u>	3/14/2016	\$50,000.00	Loan	Made b	y Candidate		: : : :
A	2/29/2016	\$25,000,00	Loan	Made b	y Candidate		: :
<u>&</u>	2/17/2016	\$70,000.00	l.oan	Made b	y Candidate		:
<u> </u>	2/10/2016	\$50,000.00	Loan	Made b	y Candidate		· · · · · · · · · · · · · · · · · · ·
<u>&</u>	1/26/2016	\$70,000.00	l.oan	Made b	y Candidate		
<u> </u>	1/22/2016	\$25,000.00	Loan	Made b	y Candidate		
₽	1/12/2016	\$25,000.00	Loan	Made b	y Candidate		
&	1/7/2016	\$5,000.00	Loan	Made b	y Candidate		
Ø.	12/30/2015	\$50,000.00	Loan	Made b	y Candidate		
₫	12/29/2015	\$50,000.00	Loan	Made b	y Candidate		
æ	12/3/2015	\$150,000.00	Loan	Made b	y Candidate		
Ø.	11/10/2015	\$100,000.00	Loan	Made b	y Candidate		
6	10/27/2015	\$20,000.00	Loan	Made b	y Candidate		±; : :
ස්	10/5/2015	\$100,600.00	Loan	Made b	y Candidate		
A	9/22/2015	\$40,000.00	Loan	Made b	y Candidate		
66	9/10/2015	\$30,000.00	Loan	Made b	y Candidate		
♠	8/27/2015	\$25,000.00	Loan	Made b	y Candidate		···
6	7/21/2015	\$100,000.00	l.oan	Made b	y Candidate		
A	7/6/2015	\$20,000.00	Loan	Made b	y Candidate		
B	6/22/2015	\$50,000.00	Loan	Made b	y Candidate		
43	5/14/2015	\$106.00	Loan	Made b	y Candidate		11 666 100 0
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Groups						Clici to Expand\Hide)	21/16
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RINGOLD/FINANCIAL MGMT.

RINGOLD FINANCIAL MGMT

VICKIE DAVIS FEDERAL ELECTION COMMISSION 999 E STREET, NW WASHINGTON DC 20463-0001



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USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify): UPS Next Bus	Shipping Date $4/22/16$ siness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	of Receipt or Postmarked
PREPARER (3/2015)	4/25/16 DATE PREPARED